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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/895,077	07/02/2001	Thomas V. Johnson	06502.0323	9092
22852	7590	03/04/2004	EXAMINER	
FINNEGAN, HENDERSON, FARABOW, GARRETT & DUNNER LLP 1300 I STREET, NW WASHINGTON, DC 20005			LEROUX, ETIENNE PIERRE	
			ART UNIT	PAPER NUMBER
			2171	6

DATE MAILED: 03/04/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

<p style="text-align: center;">Interview Summary</p>	Application No. 09/895,077	Applicant(s) JOHNSON ET AL.	
	Examiner Etienne P LeRoux	Art Unit 2171	

All participants (applicant, applicant's representative, PTO personnel):

- (1) Etienne P LeRoux. (3) Joseph E Palys.
 (2) Safet Metjahic. (4) _____.

Date of Interview: 03 March 2004.

Type: a) ☒ Telephonic b) ☐ Video Conference
 c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.
 If Yes, brief description: _____.

Claim(s) discussed: 1-56.

Identification of prior art discussed: NA.

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant questioned the restriction requirement since all claims are basically drawn to the same invention. Examiner will reconsider grouping of claims in the restriction requirement after receiving a written response by Applicant.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.



SAFET METJAHIC
SUPERVISORY PATENT EXAMINER
TECHNOLOGY CENTER 2100

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required